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1. CORRESPONDENCE ADDRESS		2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)		
DAVID M. DRISCOLL WOLF, GREENFIELD & SACKS 600 ATLANTIC AVE. BOSTON, MA 02210		INVENTOR'S NAME		
		Street Address		
		City, State and ZIP Code		
		CO-INVENTOR'S NAME		
		Street Address		
		City, State and ZIP Code		
		<input type="checkbox"/> Check if additional changes are on reverse side		
SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
07/319,523	03/06/89	009	TOMASSINI, J	239 08/10/90
First Named Applicant: WADA, AKIRA				

TITLE OF INVENTION

OPTICAL INFORMATION RECORDING AND REPRODUCING APPARATUS

	ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
2	MO6017150DMD	369-013.000	H78	UTILITY	NO	\$620.00	11/13/90

3. Further correspondence to be mailed to the following:	4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.
	1 Wolf, Greenfield & Sacks, P.C.
	2
	3

DO NOT USE THIS SPACE

060 KB 10/12/90 07319523

1.142

620.00 CK

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)		6a. The following fees are enclosed:	
(1) NAME OF ASSIGNEE: Mitsubishi Denki Kabushiki Kaisha		<input checked="" type="checkbox"/> Issue Fee <input type="checkbox"/> Advanced Order - # of Copies _____	
(2) ADDRESS: (City & State or Country) Tokyo, Japan		(Minimum of 10)	
(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION Japan		6b. The following fees should be charged to:	
A. <input type="checkbox"/> This application is NOT assigned.		DEPOSIT ACCOUNT NUMBER 23/2825	
<input checked="" type="checkbox"/> Assignment previously submitted to the Patent and Trademark Office.		(Enclose Part C)	
<input type="checkbox"/> Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.		<input type="checkbox"/> Issue Fee <input type="checkbox"/> Advanced Order - # of Copies _____	
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		The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the issue fee to the application identified above.	
		(Signature of party in interest of record)	(Date)
		<i>W. G. Sacks</i>	10-4-90
		NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.	

TRANSMIT THIS FORM WITH FEE-CERTIFICATE OF MAILING ON REVERSE

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I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

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50.00 CR

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This form is estimated to take 20 minutes to complete. Time will vary depending upon the needs of the individual applicant. Any comments on the amount of time you require to complete this form should be sent to the Office of Management and Organization, Patent and Trademark Office, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

## PART C - CHARGE TO DEPOSIT ACCOUNT

## 1. CORRESPONDENCE ADDRESS

DAVID M. DRISCOLL  
WOLF, GREENFIELD & SACKS  
600 ATLANTIC AVE.  
BOSTON, MA 02210



SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
07/319,523	03/06/89	009	TOMASSINI, J	08/10/90
First Named Applicant: WADA, AKIRA				

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MO6017150EME	369-013.000	H28	UTILITY	NO	\$620.00	11/13/90

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Wolf, Greenfield &  
Sacks, P.C.

Mitsubishi Denki Kabushiki Kaisha

Tokyo, Japan

Japan

X

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☒ Issue Fee ☐ Advanced Order - # of Copies \_\_\_\_\_  
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## 2b. The following fees should be charged to:

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